Under the Paperworl PATE	NT APPLICAT	ION FEE	DETERMIN	Spond to a colle	ction of information	mation unless	il displays a	PTO/SB 7/31/2006, OMB IRTMENT OF CO Valid OMB contri	)AIM ol ni
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L	CLAIMS AS FIL		4		<del></del>			1287/	2
FOR Annual		Numn 1) (Column 2)			SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
BASIC FEE (37 CFR 1.16(a))	NUMBER FI	EO	HUMBER EXTRA		ATE	FEE		PATE	
TOTAL CLAIMS (37 CFR 1.16(c))	minu	5 20			<u> </u>		OR		FEE
INDEPENDENT CLAIMS (37 CFR 1.16(b))			· ·		=- -		OR XI	:	
MULTIPLE DEPENDENT C		(37 CFR 1.16(	d))		=- -		OR XS		-
"If the difference in colum	n 1 is less than zero.			الن	<del></del> -		DR +,_		
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000	LAIMS MAINING	(Calumn HIGHEST	1	SM	ALL ENTIT	γ. ο		OTHER THAN	
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FIRST PRESENTATION O	MULTIPLE DEPENDE	NT CLAIM (37 (	CFR 1.16(d))	1.180	<del></del>	OR OR	1,20	2. 0	
		-		TOTAL		OR OR	+ s 366	2.	
(Colum		(Column 2)	(Column 3)	ADD'L FE	·	OR	ADD'L FE	E C	)
REMA AFT	NING ER	HIGHEST NUMBER	PRESENT	RATE	7	7		<del>-</del>	
Total AMEND	MENT Minus	PREVIOUSLY PAID FOR	EXTRA		ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
Independent (37 CFR 1.16(b))	Minus		=	x 1 <u>Z5</u> =		OR	x 1.50 =	FEE	$\dashv$
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		(37 CFF	₹ 1.16(d))	+ 1/BO=	-	OR	.340.	1	7
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CLAIM!		4GHEST	(Column 3)						4
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Total CFR 1.16(c)) ependent	Minus **	NO FOR		20	FEE	L	· · · · · · · · · · · · · · · · · · ·	TIONAL FEE	
CFR 1.16(b))	Minus ***	-	1. [	x <u> </u>		OR A	: <u>50</u> =		1
ST PRESENTATION OF MUL	IPLE DEPENDENT CL	AM (37 CFR 1.					: Z00.		
•	than the entry in column the		——————————————————————————————————————	+ : /BO=		OR +	360		

The Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fite (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO HOT SEHD FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.